.pplication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09849448

CLAIMS AS FILED - PART I								MALL E	VTITY		OTHER	THAN	
r 			(Column 1)		(Column 2)			TYPE		OR		SMALL ENTITY	
TOTAL CLAIMS				·			Γ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		· 10		ſ	X\$ 9=	9.)	OR	X\$18=	180.	
INDEPENDENT CLAIMS			∫ minus 3 =		*		Ī	X40=		OR	X80=	700	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	L	TOTAL	445	OR	TOTAL	890	
CLAIMS AS AMENDED - PART II								l			OTHER		
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	(ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CLAIM	<u> </u>		X40=		OR	X80=	·	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (Column 1) (Column 2) (Column 3)								+135≐		OR	+270=		
								TOTAL		OR.	TOTAL ADDIT, FEE		
								DDIT. FEE	4 - 5 - 3	J	AUDII, FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	• :-	=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										070		
		* 14.			•	٠.	L	+135= TOTAL		OR	+270= TOTAL		
	•.		•			• .	Αľ	DDIT. FEE		OR	ADDIT. FEE		
·	· .	(Column 1) CLAIMS		(Colun		(Column 3)	ا						
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGH : NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=	•	OR	X\$18=	ï	
	Independent	NTATION OF MI	Minus	***	CLAIN	=		X40=	16.5	OR	X80=	-	
 :	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+135=		OR	+270= ·		
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										TOTAL		
***	f the "Highest Nu	mber Previously Pai nber Previously Pai	id For IN THI	S SPACE IS	s less tha	n 3, enter "3."	AD	DIT. FEE L	ropriate box	• •	ADDIT. FEE I uran 1.		